

STATE REPORT 10.25.2020

SUMMARY

- Illinois is in the red zone for cases, indicating 101 or more new cases per 100,000 population last week, with the 12th highest rate in the country. Illinois is in the yellow zone for test positivity, indicating a rate between 5.0% and 7.9%, with the 23rd highest rate in the country.
- Illinois has seen a continued increase in new cases and in test positivity over the last week. Hospitalizations have continued to increase for four weeks and have reached levels last seen in early June.
- Moderate to high viral transmission is widely distributed throughout Illinois. The following three counties had the highest number
 of new cases over the last 3 weeks: 1. Cook County, 2. DuPage County, and 3. Will County. These counties represent 48.2% of new
 cases in Illinois
- 85% of all counties in Illinois have moderate or high levels of community transmission (yellow, orange, or red zones), with 33% having high levels of community transmission (red zone).
- Outbreaks have been tied to social gatherings (weddings, funerals, college parties) with large numbers of young people and without social distancing; news reports indicate that some businesses have are not following mitigation measures.
- Institutions of higher education (IHE): University of Illinois at Urbana-Champaign (Champaign) continued to report stably low case rates among the campus community a test positivity of 0.19% in the last week despite the increasing rate of cases in the state and the slight overall increase in Champaign County.
- During the week of Oct 12 Oct 18, 15% of nursing homes had at least one new resident COVID-19 case, 30% had at least one new staff COVID-19 case, and 5% had at least one new resident COVID-19 death.
- Illinois had 220 new cases per 100,000 population in the last week, compared to a national average of 133 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 62 to support operations activities from FEMA; 5 to support operations activities from ASPR; 2 to support epidemiology activities from CDC; and 7 to support operations activities from USCG.
- Between Oct 17 Oct 23, on average, 309 patients with confirmed COVID-19 and 563 patients with suspected COVID-19 were
 reported as newly admitted each day to hospitals in Illinois. An average of 94% of hospitals reported either new confirmed or new
 suspected COVID patients each day during this period.

RECOMMENDATIONS

- This week, we have included PPE availability reported from your hospitals. We will continue to work together on improving the quality of reporting on hospital admissions and supplies.
- We share the concern of the state leaders that the current situation is worsening and that additional measures are needed to limit increases in hospitalizations and deaths. Illinois's ability to limit further cases and avoid increases in hospitalizations and deaths will depend on increased observation of social distancing mitigation measures by the community. The Governor's decision to increase the frequency of communications to the public is commended.
- Illinois has a carefully crafted plan for tiered mitigation for the 11 public health regions in the state for adaptive changes in mitigation measures depending on local disease activity. Continue the strong mitigation efforts statewide. Mitigation efforts should continue to include mask wearing, physical distancing, hand hygiene, avoiding crowds in public and social gatherings in private, and ensuring flu immunizations, as well as tailored business and public venue measures. Given the rapid increases in cases and hospitalizations observed, increasing mitigation measures should be done expeditiously to avoid falling behind the rapid spread. Recommend working closely with local leaders in red zones or state-designated high-risk communities, to increase mitigation at least temporarily to blunt the upsurge associated with large numbers of newly infected and highly infectious individuals.
- Continue to use testing and case investigations strategically to identify and mitigate these areas of increasing disease activity and the transmission venues. Consider implementing increased randomized community testing to find asymptomatic infected individuals, isolate them and trace contacts. This model has helped universities control spread in their communities. Use of rapid tests are extremely helpful in these activities.
- As state and local leaders use case investigation information to weigh how to most effectively mitigate increasing cases while maximizing economic activity, it may be useful to emphasize that compliance with restrictions on public and private gathering sizes, especially indoors, will help limit the superspreader events that are critical to rapid epidemic spread. This in turn will help to increase the level at which businesses can operate safely.
- In red and orange counties, both public and private gatherings should be as small as possible and optimally, not extend beyond
 immediate family.
- Given rapid increase in cases among residents of long-term care facilities and other congregate settings, continue testing programs in long-term care facilities, with prompt testing of all residents in any facility with an active case and repeat testing for all staff.

 Utilize point-of-care testing platforms to facilitate rapid COVID-19 case identification.
- Continue to implement plan to increase surveillance for community spread using the Abbott BinaxNOW or other antigen tests, especially to protect the elderly and other vulnerable populations. Establish weekly surveillance to monitor degree of community spread among K-12 teachers; staff working at nursing homes, assisted living, and other congregate living settings; prison staff; and first responders as tests become available. Increased rate of infection seen among LTCF workers indicates significant transmission in their communities and those transmission settings must be identified and mitigated.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.



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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW COVID-19 CASES (RATE PER 100,000)	27,858 (220)	+23%	105,807 (201)	436,442 (133)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	7.0%	+0.7%*	7.2%	5.8%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	403,968** (3,188**)	+3%**	1,522,134** (2,897**)	6,706,546** (2,043**)
COVID-19 DEATHS (RATE PER 100,000)	253 (2.0)	+14%	1,038 (2.0)	5,484 (1.7)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	15%	+3%*	13%	12%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	30%	+4%*	29%	24%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	5%	+2%*	5%	4%

DATA SOURCES - Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 10/23/2020; last week is 10/17 - 10/23, previous week is 10/10 - 10/16.

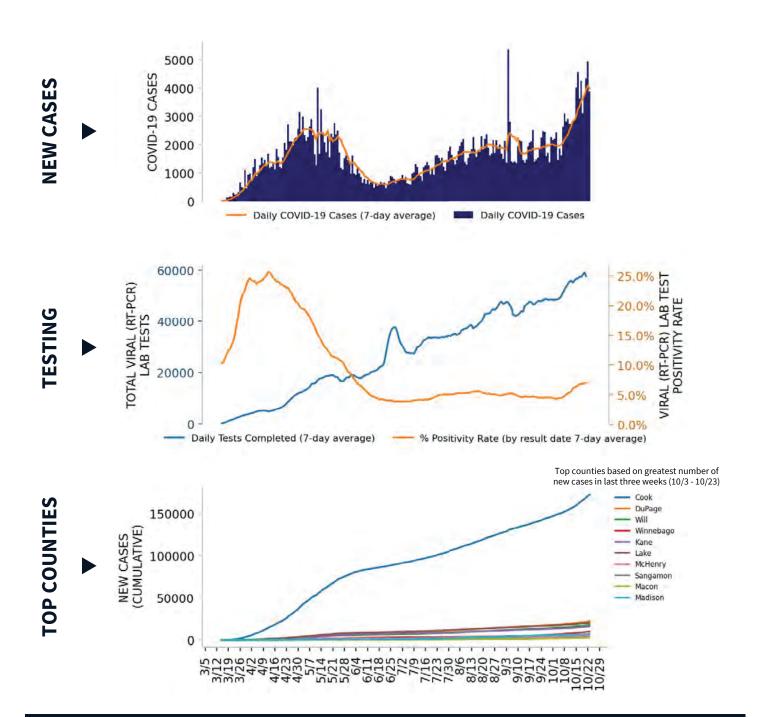
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 10/21/2020. Last week is 10/15 - 10/21, previous week is 10/8 - 10/14.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Last week is 10/12-10/18, previous week is 10/5-10/11. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.

^{*} Indicates absolute change in percentage points.

^{**} Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

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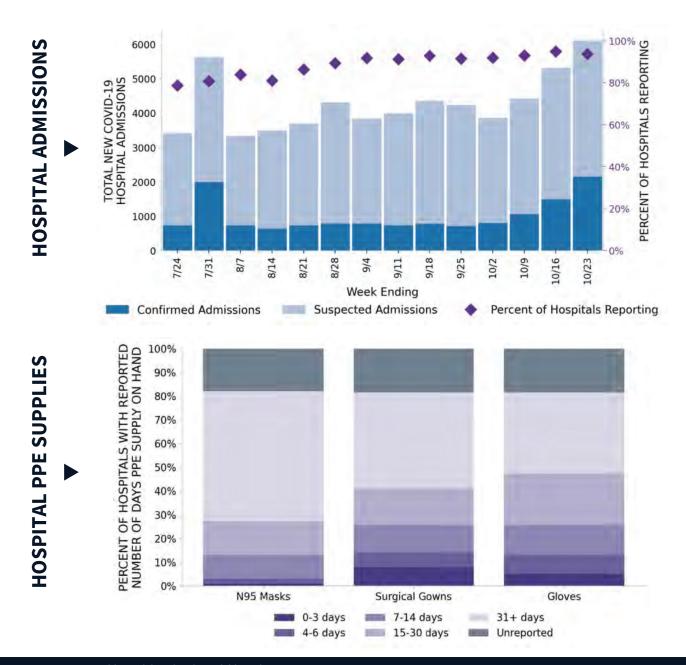
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Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 10/21/2020.

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190 hospitals are expected to report in Illinois



DATA SOURCES – Additional data details available under METHODS

Hospitalizations: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure.

PPE: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Values presented show the latest reports from hospitals in the week ending 10/21/2020.

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COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

METRO AREA (CBSA) LAST WEEK

COUNTY LAST WEEK

LOCALITIES IN RED ZONE	10 ▲ (+2)	Rockford Decatur Sterling Rochelle Centralia Freeport Dixon Macomb Burlington Cape Girardeau	34 ▲ (+5)	Winnebago Kane McHenry Macon Rock Island Boone Whiteside Clinton Ogle Williamson Franklin Marion
LOCALITIES IN ORANGE ZONE	9 ■ (+0)	Chicago-Naperville-Elgin St. Louis Davenport-Moline-Rock Island Carbondale-Marion Danville Quincy Galesburg Effingham Fort Madison-Keokuk	16 ▼ (-8)	Will Madison Vermilion Adams Kendall Knox Effingham Grundy Union Fayette Montgomery Warren
LOCALITIES IN YELLOW ZONE	11 (+0)	Peoria Springfield Ottawa Kankakee Charleston-Mattoon Mount Vernon Jacksonville Taylorville Pontiac Lincoln Paducah	37 ▲ (+5)	Cook DuPage Lake Sangamon St. Clair Peoria Tazewell DeKalb LaSalle Kankakee Coles Fulton
	Change from pre	vious week's alerts:	▲ Increase	Stable ▼ Decrease

All Red Counties: Winnebago, Kane, McHenry, Macon, Rock Island, Boone, Whiteside, Clinton, Williamson, Ogle, Franklin, Marion, Stephenson, Douglas, Randolph, Lee, McDonough, Shelby, Jo Daviess, Pike, Crawford, Johnson, Saline, Wayne, Bond, Clay, Clark, Mercer, Washington, Cumberland, Henderson, Hamilton, Edwards, Alexander

All Orange Counties: Will, Madison, Vermilion, Adams, Kendall, Knox, Effingham, Grundy, Union, Fayette, Montgomery, Warren, Carroll, Wabash, Pulaski, Greene

All Yellow Counties: Cook, DuPage, Lake, Sangamon, St. Clair, Peoria, Tazewell, DeKalb, LaSalle, Kankakee, Coles, Fulton, Jefferson, Jackson, Monroe, Christian, Macoupin, Livingston, Morgan, Bureau, Moultrie, Henry, Woodford, Mason, De Witt, Logan, Piatt, Ford, Richland, Jersey, Hancock, Perry, Menard, Brown, Schuyler, Massac, Scott

Note: Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

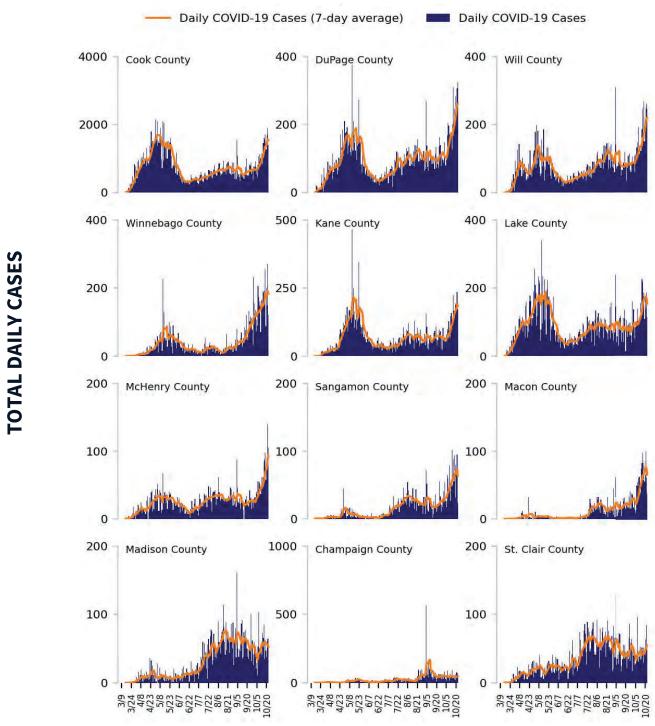
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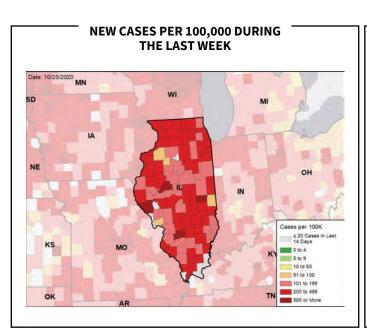
^{*} Localities with fewer than 10 cases last week have been excluded from these alerts.

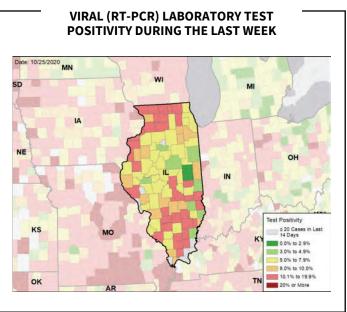
Top 12 counties based on number of new cases in the last 3 weeks

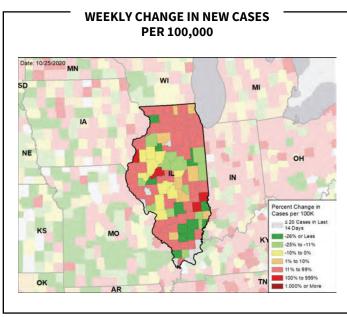


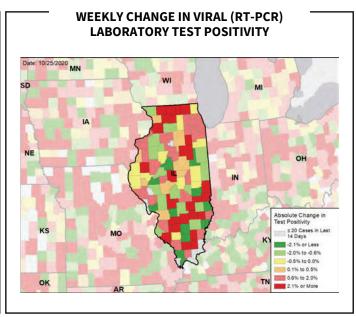
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CASE RATES AND VIRAL LAB TEST POSITIVITY DURING THE LAST WEEK









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